## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

## **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: AURORA RESIDENTIAL ALTERNATIVES II (62) (610256)

Address: 2040 JEFFERSON STREET, STEVENS POINT, WI 54481

License Status: REGULAR

Licensed/Certified/Registered 01/01/1996

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History						
Survey ID: 0095071 Results: NO STATEME	End Date: 06/15/2005	J I	Purpose: SURVEY			
Survey ID: 0090783	End Date: 06/11/2003	3 Type: STANDARD	Purpose: SURVEY			
Results: ENFORCEMENT ACTION						
Statement of Deficiency: #10005208 Served 08/12/2003						
	Deficiencies Cited 83.35(4)(a) 83.43(4)(b)3 83.53(2)(a)	Subject Area FOOD SUPPLY BATTERY OPERATED AN DOORS EXCEPT PATIO D		Compliance Verified 06/15/2005 06/15/2005 06/15/2005	Corrected Yes Yes Yes Yes	

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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**Enforcement History** 

Date: 08/11/2003 SOD #10005208 Appealed: Yes Decision: STIPULATION

**Sanctions** 

OTHER SANCTION

FORFEITURE---83.33(3)(b)2.d SOD #10005208 FORFEITURE---83.53(2)(a) SOD #10005208

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